

**DECLARATION AND POWER OF ATTORNEY**

As a below named inventor, I hereby declare:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor, if only one name is listed below, or an original, first and joint inventor, if plural names are listed below, of the subject matter which is claimed and for which a patent is sought on the invention entitled SWIM STROKE TRAINER, the specification of which is attached hereto.

I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose to the United States Patent and Trademark Office (the Office), all information which is known by me to be material to patentability as defined in Title 37, Code of Federal Regulations (C.F.R.), Section 1.56.

**POWER OF ATTORNEY**

I hereby appoint the patent law firm of Van Dyke, Gardner, Linn & Burkhart, LLP, P.O. Box 888695, Grand Rapids, Michigan 49588-8695, telephone number 616/975-5500, facsimile number 616/975-5505, and the individual patent attorneys and patent agents at such patent law firm, namely, Daniel Van Dyke, Reg. No. 25 046; Donald S. Gardner, Reg. No. 25 975; Terence J. Linn, Reg. No. 30 283; Frederick S. Burkhart, Reg. No. 29 288; Catherine S. Collins, Reg. No. 37 599; Matthew L. Goska, Reg. No. 42 594; and Timothy A. Flory, Reg. No. 42 540, my attorney(s) or agent(s) with full power of substitution and revocation, to prosecute this application and to transact all business in and to receive all correspondence from the Patent and Trademark Office connected therewith.

All statements made herein of my own knowledge are true and all statements made on information and belief are believed to be true, and further, these statements are made with the knowledge that willful false statements and the like are punishable by fine or imprisonment, or both, under 18 U.S.C. § 1001, and that such willful false statements may jeopardize the validity of this application or any patent issued thereon.

Sole or First joint inventor:

Thomas G. Topolski 10/7/2002  
 Thomas G. Topolski Date

Citizenship: United States of America

Residence: 5358 Discovery, S.E.  
 Kentwood, MI 49508

Post Office Address: 5358 Discovery, S.E.  
 Kentwood, MI 49508

Applicant or Patentee: THOMAS G. TOPOLSKI  
 For: SWIM STROKE TRAINER

VERIFIED STATEMENT (DECLARATION) CLAIMING SMALL ENTITY  
 STATUS (37 C.F.R. § 1.9[f] and 1.27[b]) - INDEPENDENT INVENTOR

As a below named inventor, I hereby declare that I qualify as an independent inventor as defined under 37 C.F.R. § 1.9(c) for purposes of paying reduced fees under Sections 41(a) and (b) of Title 35, United State Code, to the Patent and Trademark Office with regard to the invention entitled SWIM STROKE TRAINER described in:

- ( x ) the specification filed herewith.  
 ( ) application serial no. \_\_\_\_\_, filed \_\_\_\_\_.  
 ( ) patent no. \_\_\_\_\_, issued \_\_\_\_\_.

I have not assigned, granted, conveyed, or licensed and am under no obligation under contract or law to assign, grant, convey, or license, any rights in the invention to any person who could not be classified as an independent inventor under 37 C.F.R. § 1.9(c) if that person had made the invention, or to any concern which would not qualify as a small business concern under 37 C.F.R. § 1.9(d) or a non-profit organization under 37 C.F.R. § 1.9(e).

Each person, concern, or organization to which I have assigned, granted, conveyed, or licensed or am under an obligation under contract or law to assign, grant, convey, or license any rights in the invention is listed below:

- ( x ) no such person, concern, or organization.  
 ( ) persons, concerns, or organizations listed below\*

\*NOTE: Separate verified statements are required from each named person, concern or organization having rights to the invention averring to their status as small entities (37 C.F.R. § 1.27).

FULL NAME N/A

ADDRESS \_\_\_\_\_

( ) INDIVIDUAL ( ) SMALL BUSINESS CONCERN ( ) NON-PROFIT ORGANIZATION

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 C.F.R. § 1.28[b]).

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

THOMAS G. TOPOLSKI

Thomas G. Topolski  
 Signature

7/10/2002  
 Date